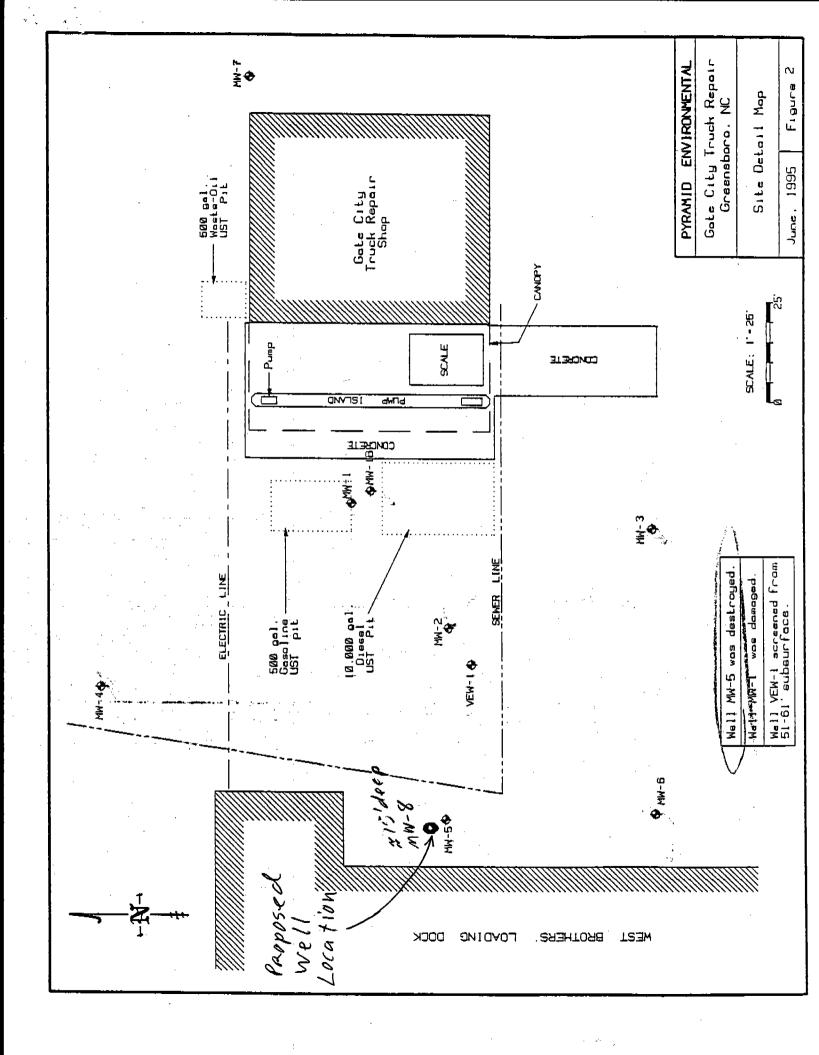
GUILFORD COUNTY DEPARTMENT OF PUBLIC HEALTH

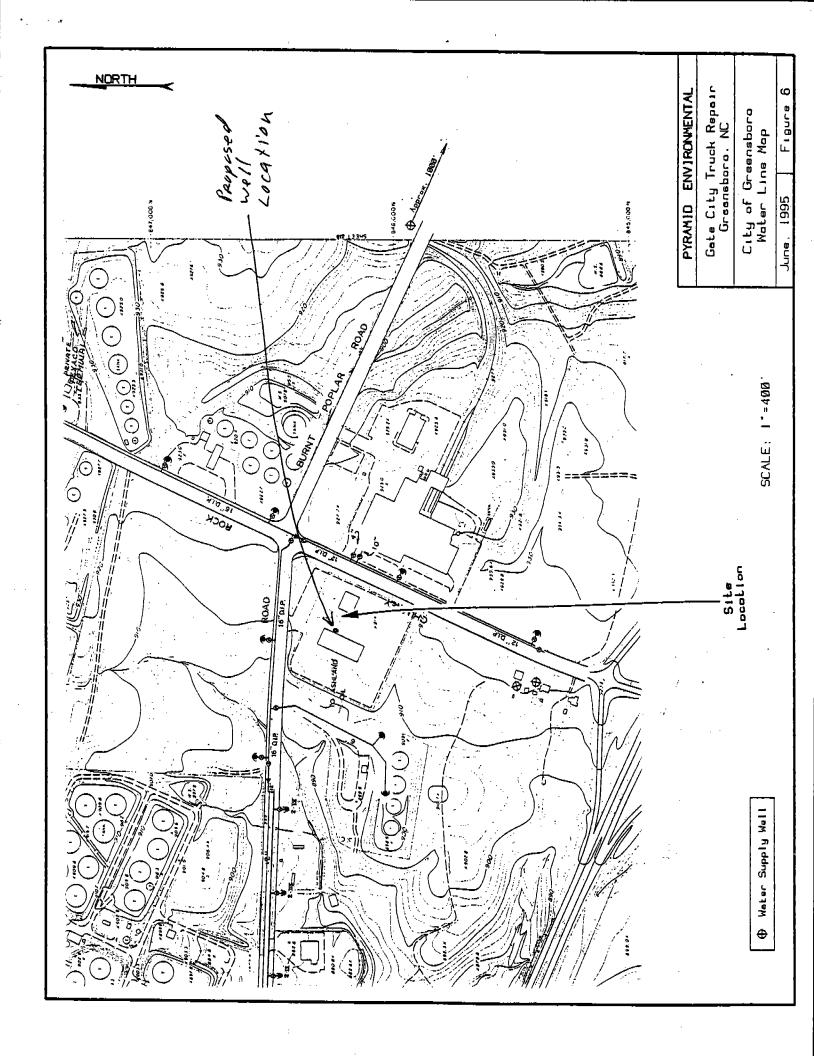
DIVISION OF ENVIRONMENTAL HEALTH

APPLICATION FOR PERMIT TO CONSTRUCT A MONITORING/RECOVERY WELL SYSTEM

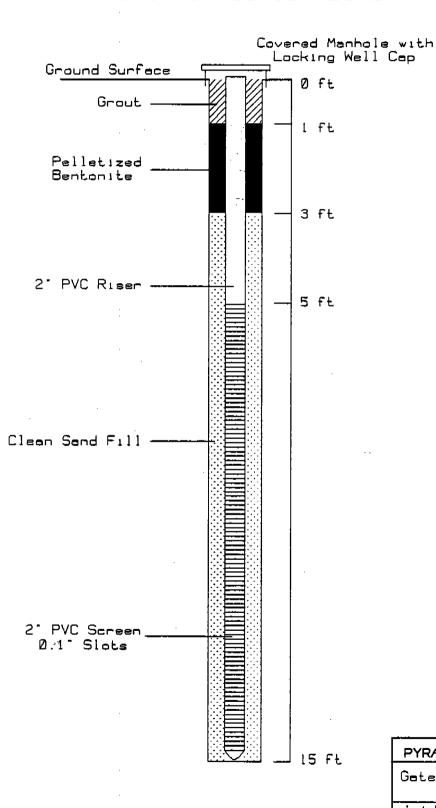
Date: 5/15/96	
In accordance with the provisions of the Guilford County Board of Health Rules a and Abandonment of Monitoring and Recovery Wells, application is monitoring/recovery wells.	nd Regulations Governing the Construction hereby made for a permit to construct
1. Site Name: Gate City Truck Repair (ARA/Sm	1743 Incident #: 18877
2. Address of Well: 6301 Burnt Poplar Rd. Greensboro	
3. Name of Well Owner Lindley Proporty Trus	Telephone:
4. Owner's Mailing Address: P.O. Box 35681, 6p.	eensboro, NC 27425-5681
5. Property Owner (if different from well owner):	
6. Property Owners' Mailing Address:	
7. Reason for Monitoring Well(s): Environmenta / Assected cor	tamination, environmental assessment, etc.)
8. Type of facility for which the well is needed: Former U	,
9. Contaminant type (if applicable): 47 Ano can bons (e.g. nutrients, organics, heavy metals	
10. Are there existing recovery wells associated with the monitorin If yes, how many? Number of new/additional recover	g well(s)? <u>No</u> y well(s) to be installed
11. Distance to a known waste or pollution source:	feet
12. Are any water supply wells located <500 feet from the propo If yes, give distance:feet	sed well? <u>No</u> .
13. Well Driller: Pyramid Envisonmental	Fee: \$ 20000
14. Registration #: 1673	Date Paid: 5-17-96
15. Driller's Address: 2706 Pinedale Rd	Receipt# : <u>14700</u>
15. Driller's Address: <u>2706 Pinedale Rd</u> GREENS 60RO, NC 27488 Telephone: <u>(918) 282-9028</u>	
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PROPOSED MONITORING/RECOVERY WELL CONSTRUCTION INFORMATION
1. Total number of wells to be constructed: Number to be completed in bedrock:
Number to be completed in unconsolidated material:
2. Estimated depth of well(s): 15 100 feet
3. Gravel or sand pack interval (if appropriate): From3feet to15feet
4. Type of casing used: PVC (i.e. PVC, stainless steel, galvanized steel, etc.)
5. Diameter of casing: 2 inches Thickness of casing: inches
6. How will the well(s) be secured? Locking well cap in manhale.
7. Beginning construction date: 5/17/96
8. Completion date: 5/17/96
ADDITIONAL INFORMATION
1. ATTACH A SITE MAP SHOWING THE LOCATIONS OF THE FOLLOWING:
(a) PROPOSED MONITORING/RECOVERY WELL(S)
(b) ALL EXISTING MONITORING/RECOVERY WELLS AND TEST BORINGS WITHIN THE PROPERTY BOUNDARY
(c) ALL WATER SUPPLY WELLS WITHIN 500 FEET OF THE WELL
(d) AT LEAST TWO REFERENCE POINTS (e.g. numbered roads, intersections, streams, etc.)
2. PROVIDE A WELL CONSTRUCTION DIAGRAM OF EACH WELL SHOWING DIAMETER, ESTIMATED DEPTH, SCREEN INTERVALS, SAND/GRAVEL PACKS, TYPE OF CASING MATERIAL, CASING WALL THICKNESS, WELL HEAD COMPLETION DETAILS, ETC.
The Applicant hereby agrees the proposed well(s) will be constructed in accordance with approved specifications and conditions of the Well Construction Permit as regulated under the Guilford County Board of Health Rules and Regulations Governing the Construction and Abandonment of Monitoring and Recovery Wells and accepts full responsibility for compliance with these rules. Geologi's Trile Title Title
Signature of Applicant of Agent
If the property is owned by someone other than the applicant, the property owner hereby consents to allow the applicant to construct monitoring wells as outlined in this application and that it shall be the responsibility of the applicant to ensure that
these monitoring/recovery wells conform to the Guilford County Board of Health well construction standards.
Attach agreements.
Signature of Property Owner (if different from applicant)





WELL CONSTRUCTION DIAGRAM



PYRAMID ENVIRONMENTAL

Gote City Truck Repair Greensboro, NC

Inetalled by:

MW-

Installed on: